

**San Bernardino County Museum**  
**2024 Orange Tree Lane**  
**Redlands, California 92374**  
**(909) 307-2669**

## Volunteer Application

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Home Address (Number & Street, City, Zip Code)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Home Telephone #

\_\_\_\_\_  
Work Telephone #

\_\_\_\_\_  
Message Telephone #

\_\_\_\_\_  
Email Address

### **General Information:**

Why are you interested in volunteering with us? What are your goals, or what you do hope to gain by volunteering?

Do you have an interest or activity in mind that you would like to pursue in your volunteer experience?

### **Experience:**

Do you have prior museum (or similar) experience? Check all that apply.

\_\_\_\_\_ Yes, as a volunteer

\_\_\_\_\_ Yes, as a student

\_\_\_\_\_ Yes, as an employee

\_\_\_\_\_ Yes, as a regular museum visitor

\_\_\_\_\_ No, but I'm willing to learn

What other experience or skills do you have that you feel will lend itself to volunteering with us?

What are your interests and hobbies?

**Work environment**

How do you feel about interacting with people individually, in small groups, and in large groups?

Do you prefer to work with a committee, a partner, or by yourself? Why?

**What is your availability?**

\_\_\_\_\_ Short-term (for example, a 30-hour community service project)

\_\_\_\_\_ Long-term, every week

\_\_\_\_\_ Long-term, every month

\_\_\_\_\_ Occasional, for special events and projects

\_\_\_\_\_ Weekday(s) only

\_\_\_\_\_ Weekend(s) only

\_\_\_\_\_ Any time

\_\_\_\_\_ Other (please describe): \_\_\_\_\_

\_\_\_\_\_

If accepted as a volunteer at the SBCM, I understand I will attend a Museum Orientation, act responsibly in my role as a volunteer, and keep my supervisor informed of any changes I may need to make in my schedule or work assignment. I further understand that the Museum staff will provide me with training, guidance, a name badge and any other items or information I need to know in order for me to volunteer in a professional manner.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature for Minor: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use Only** .....

Applicant contacted on:

Referred to:

Staff name:

Date: